ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT

PERMITTEE NAME					PERMIT NO.					
First Asset Holding				ļ	4908-WR-2					
PERMITTEE ADDRESS					AFIN NO.					
PO Box 7					04-01681					
Ft Smith AR 72902										
		WASTEW	DD							
		MM/DD/YYYY		· · · · · · · · · · · · · · · · · · ·	MM/DD/YYYY					
		2/1/2020 2/29/2020								
TREATED WASTEWATER EFFLUENT SAMPLE	ING	· · · · · · · · · · · · · · · · · · ·								
Parameter		Limit Sample Measurement Units M		Monitoring	R	Reporting				
Flow, Monthly total		REPORT	0.271,498	MG	Total Flow per calendar month					
Flow, daily maximum *		REPORT	0.013,362	GPD	Daily					
Carbonaceous Biochemical Oxygen Demand (CBC	DD5)	30	< 2.0	mg/l						
Total Suspended Solids (TSS)		45	12.8	mg/l						
Fecal Coliform Bacteria (FCB)		4,000	< 1.0	colonies/100ml	Grab Sample once per month					
рН		6.0 - 9.0 7.4 s.u.					the 15th of the owing Month			
Total Phosphorus (TP)		REPORT		mg/l						
Total Kjeldahl Nitrogen (TKN)		REPORT		mg/l						
Ammonia Nitrogen		REPORT		mg/l	Grab sample once per quarter					
Nitrate Nitrogen (NO3-N) + Nitrite Nitrogen (NO2-N)	REPORT		mg/l						
Plant Available Nitrogen (PAN)		REPORT		mg/l						
NAME OF PRINCIPAL EXECUTIVE OFFICER	4	ER PENALTY OF LAW THAT I HAVE PERS	1 m 1 1 1	1-1	TELEPHONE					
Kathy Bartlett	IMMEDIATELY F	N SUBMITTED HEREIN; AND BASED ON RESPONSIBLE FOR OBTAINING THE INF	ORMATION, I BELIEVE THE S	4 muster	\mathcal{O}	(479) 530- 5926				
·		TRUE, ACCURATE, AND COMPLETE. I A	SIGNATURE OF COGNIZANT O	FFICIAL	DATE					
TYPED OR PRINTED	PENALTIES FOR	SUBMITTING FALSE INFORMATION, INC IMPRISONMENT.			3/13/2020					
COMMENTS AND EXPLANATION OF	VIOLATIONS (Refer	ence all attachments here)								
* LOADING RATE	BY ZONE									
Zone 1 2227 Zone 5	2227									

Zone 2

Zone 3

Zone 4

2227

2227

2227

Zone 6

2227

Environmental Services Company, Inc.

Corporate Office 13715 West Markham Little Rock, AR 72211 Tel. (501)221-2565 Fax (501)221-1341 Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762 Tel. (479)750-1170 Fax (479)750-1172

Control Number: 2002020094

Customer Name : DEER HAVEN UTILITY LLC

Customer/Permit No.: 1821 / 4908-WR-1

Report Date : 02/27/20

Sample Date : 02/20/20

Sample Time : 1511

Sample Type : GRAB WATER

Sample From : DOSE TANK/EFFLUENT

Collected By: NTR Delivery By: NTR

Work Order:

Purchase Order :

•		Laboratory Analysis			Quality 1	Assurance
Analysis					Precision	Accuracy
Date Time By	Parameter	Result Notes	Quantity	Method	% RPD	<pre>% Recovery</pre>
02/20 1513 NTR	рн	7.4 S.U.		SM 2011 4500-H+ B	1.34	N/A
02/26 1400 TSB	Phosphorous, Total (as P)	8.24 mg/L		EPA 365.3	1.36	102.0 *
02/25 1345 TSB	Solids, Total Suspended	12.8 mg/L	•	SM 2011 2540 D	3.28	N/A *
02/20 1740 TWM	Fecal Coliform (MPN/100mL	< 1.0 /100ml		06/2012 Colilert18	0.00	0.0 *
02/21 1200 TSB	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	0.00	96.3 *
		•			•	•

* QA data shown is from a different sample or standard on the same date.

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature

Environmental Services Co., Inc.

271,498

Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762

website: www.esclabs.com

Corporate Office, Little Rock, Arkansas 501-221-2565

Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

Phone: 479-750-1170	Fax: 479-750-1172		GF	IAIN C	JF CU	5101	JY										
Client Information				Project Information						Requeste				Parameters			
Company Name:	Deer Haven Utility LLC			Permit/Project #:													
Address:				Purchase	Purchase Order #:										ı	ŀ	
Avoca Ar 72711															1		
Telephone:			 -	Sampler Name(s): $N\epsilon$			of Riossa						Ē				
Telephone:				Campier Name(e).			Ned Ryerson Med Ryer -					22	Coliform (43.1F)	.			
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				<u> </u>			Ord orgen				(22)	CBOD(70), TSS(28)	ξį			. !	
ESC Client Number:	1821	,							€	3	ပ္ပ				. 1		
Sample Ider	ntification	Sample (Collection		Sample (Containers		(23)	Total P	笝	Fecal (
Identification	ESC Control #	Date	Time	Туре	Matrix	Type	Volume	Preservativ	/e #	표	P	<code-block></code-block>	n e				
Dose Tank/Effluent	2002020094	2/20/20	1511	GRAB	Water	teflon	150 mi	None, Cool	1 0	Х							
Dose Tank/Effluent				GRAB	Water	Plastic	8 oz	H₂SO₄,pH<	2 1		х						
Dose Tank/Effluent				GRAB	Water	Plastic	1 qt	None, Cool				Х					
Dose Tank/Effluent				GRAB	Water	Whirlpak		NaS₂O₄ Coo		\square			х		\neg		-
DOSC TAIRVEINGUIT	 			GIVAD	VValci	VVIIIIPAK	100 1111	110204 000			$\vdash \vdash$						
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Relinquished By: (Signature and Printed Name) Date Time		Time	Received By: (Signature and Printed Name) Date Time			Time	Custo Used	ody Se	als:	·	Intac						
Relinquished By: (Signature and Printed Name) Date		Time	Received By: (Signature and Printed Name) Date Time			Time		round			intac						
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Relinatished Bry (Signature and Printed Name) 100 June Ned Lyevson 2/28/20 2/3		2/25/00	Received for Lab By: (Signature and Printed Name) 1 Date 1135		Time 135	L.	samp Yes	les pro	openy		rved: No		.				
Comments: 0 173					Field Test			Resu		Result			Units				
					pH:	1513	NM	·7.	7.4 7.5		5_	<u> </u>					
				Time:		Temp.: DO:	<u> </u>						°C	 -	°F	-	
				Reading: Units:		Debris:	 -						<u> </u>			\dashv	
Cool all samples to 6 degrees C.							Chlorinated	? Yes No		This	Doc	ume	nt is	Pagr	<u>a .]</u>	of <u>i</u>	

NWA UTILITY SERVICES, INC

PO Box 9299 Fayetteville, AR 72703





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ADEQ Water DIV. Permits Branch 5301 Northshore Drive N. Little Rock, AR 72118